2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000042237

Entity Name: PREMIER FOLIAGE, INC.

FILED Apr 09, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

19950 SW 216 STREET 19901 SW 216 STREET MIAMI, FL 33170 US MIAMI, FL 33170

Current Mailing Address: New Mailing Address:

19901 SW 216 STREET 19950 SW 216 STREET MIAMI, FL 33170 MIAMI, FL 33170

FEI Number: 65-0671005 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

REISMAN, JOSEPH B REISMAN, JOSEPH B ONE SE THIRD AVENUE STE 2600 ONE SE THIRD AVENUE STE 3050

MIAMI, FL 33131 MIAMI, FL 33131 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOSEPH B REISMAN 04/09/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition MATALON, PAUL Name: Name: MATALON, PAUL 19950 SW 216 STREET 19901 SW 216 STREET Address: Address:

City-St-Zip: MIAMI, FL 33170 City-St-Zip: MIAMI, FL 33170

Title: VSD Title: VSD () Delete (X) Change () Addition TRUPPMAN, LINDA Name: TRUPPMAN, LINDA Name: 6005 SW 135TH TERRACE 19901 SW 216 STREET Address: Address:

MIAMI, FL 33156 MIAMI, FL 33170 City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition VSD () Delete VSD MATALON, PETER MATALON, PETER Name: Name:

19950 SW 216TH ST 19901 SW 216TH ST Address: Address: City-St-Zip: MIAMI, FL 33170 City-St-Zip: MIAMI, FL 33170

Title: TD () Delete Title: (X) Change () Addition

MATALON, CAROLE MATALON, CAROLE Name: Name: Address: 19950 SW 216TH ST Address: 19901 SW 216TH ST City-St-Zip: City-St-Zip: MIAMI, FL 33170 MIAMI, FL 33170

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL MATALON PD 04/09/2007